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Signature

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/801,929 \
Filing Date	March 9, 2001
First Named Inventor	Charles Patrick THACKER
Art Unit	2675
Examiner Name	Ming Hun Liu
Attorney Docket Number	003797.00092

		Attorney Docket Number	003797.00092						
ENCLOSURES (check all that apply)									
Fee Transmittal	Form	☐ Drawing(s)	After Allowance Communication to Group						
Fee Attache	d	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences						
☐ Antendment / Reply		Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
After Final		Petition to Convert to a Provisional Application	Proprietary Information						
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address	Status Letter						
Extension of Time Request		Terminal Disclaimer	Other Enclosure(s) (please identify below):						
Express Abandonment Request		Request for Refund	Request for Continued Examination						
Information Disclosure Statement		CD, Number of CD(s)							
Certified Copy of Priority Document(s)		Remarks	RECEIVED						
Response to Missing Parts/ Incomplete Application			JUL 1 5 2004						
Response to Missing Parts under 37 CFR 1.52 or 1.53		Technology Center 2600							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm or Individual name	Jordan N. Bodner, Reg. No. 42,338								
Signature / / / / / / / / / / / / / / / / / / /									
Date	July 8, 2004								
		CERTIFICATE OF TRANSMISSION/MAI	LING						
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Typed or printed nam	е								

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions.for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date

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FEE TRANSMITTAL				Complete if Known						1	
				Application Number			09/801,929				
for FY 2004			l	Filing			March 9, 2001				_
				First Named Inventor			Charles Patrick THACKERECE			EIVE	D
Effective 10/01/2003. Patent fees are subject to annual revision.			—-	Examiner Name			Mina Hun Liu			_ ^^^	1
Applicant claims small entity status. See 37 CFR 1.27			.27	Art Unit 2675 JUL 1			JUL 1	5 2004]		
TOTAL AMOUNT OF PAYMENT (\$) 1190				Attorney Docket No. 003797.00092 Technology				Center	<u>′</u> 260		
	METHOD OF PAYMEN	IT (check all that apply)						ALCULATION (co	ntinued)]
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Account Number	19-0733			1051 1052	130 50	2051 2052	65 25		filing fee or oath provisional filing fee		
Deposit			7 	1053	130	1053	130	or cover sheet. Non-English spe	cification	—	
Account Name	Banner &	Witcoff, LTD.		1812	2,520	1812	2,520		st for reexamination		
The Director is	s authorized to: (chec		- ⁻	1804	920*	1804	920*	Examiner action	ication of SIR prior to		
☑ Charge any	additional fee(s) durin	I Credit any overpayments g the pendency of this application cept for the filing fee	on	1805	1,840*	1805	1,840*	Requesting publi Examiner action	ication of SIR after		
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	FEE CALC	ULATION		1252	420	2252	210	Extension for rep month	ly within second	420	
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Large Entity	Small Entity			1254	1,480	2254	740	Extension for rep	ly within fourth		
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1002 340		sign filing fee		1402	330	2402	165	Filing a brief in s	upport of an appeal		1
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Total Claims	- ** = 0	X = 0	⊐ l	1460	130	1460	130	Petitions to the C			
Independent	- ** = 0	x = 0		1807	50	1807	50	-	nder 37 CFR 1.17 (q) formation Disclosure	' 	
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Code (\$) 1202 18	Code (\$) 2202 9	Claims in excess of 20		1810	770	2810	385	(37 CFR § 1.129 For each addition	(a)) nal invention to be	-	1
1202 18	2202 9	Independent claims in excess of	₃					examined (37 CF			
1203 290	1	Multiple dependent claim, if not p		1801	770	2801	385	Request for Continu	ued Examination (RCE)	770	
1204 86	2204 43	** Reissue independent claims or original patent		1802	900	1802	900	Request for expedi	ted examination		l
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**or number p	reviously paid, if greater; I	or Reissues, see above	'	Reau	cea by B	asic Filing	, ree P	aiu SUBT	OTAL (3) (\$) 1	190	
SUBMITTED BY								Comp	olete (if applicable))
Name (Print/Type)	Jordan N. Bodne			ration No ey/Agen		2,338		Telephone	202-824-3000		
Signature	7	THE						Date	July 8,2004		J
	- WARNING: I	nformation on this form may b		- Aublia	Crodi	t card in	forma	1			

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